

HAWAII STATE ETHICS COMMISSION

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LOBBYIST REGISTRATION FORMS HAWAII (Type or Print Clearly)

PART I LOBBYIST	(1),,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
NAME (Last)	(First)	(Middle)	TELEPHONE
Yosemori	JoAnn		808-546-3868
MAILING ADDRESS (Street)			FAX 808-546-8500
1177 Bishop Street			EMAIL joann.yosemori@hawaiiantel.com
(City)	(State)		(Zip Code)
Honolulu	HI		96813
EMPLOYING ORGANIZATION (Fill in only	if you are employed by a business e	ntity which has been retained to lobby)	TELEPHONE
Hawaiian Telcom, Inc.			808-546-3868
MAILING ADDRESS (Street)	_		FAX 808-546-8500
1177 Bishop Street			EMAIL joann.yosemori@hawaiiantel.com
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PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LO	TELEPHONE	
Hawaiian Telcom, Inc.	808-546-3868 FAX 808-546-8500	
MAILING ADDRESS (Street)		
1177 Bishop Street		EMAIL joann.yosemori@hawaiiantel.com
(City)	(State)	(Zip Code)
Honolulu	ні	96813
NAME OF PERSON RESPONSIBLE FO	TELEPHONE	
JoAnn Yosemori		808-546-3868
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PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY						
Agriculture	Education	Human Services	Science, Technology & Economic Development			
Communications & Public Utilities	Government Operation & Finance	Intergovernmental Relations, International Affairs	Tourism & Recreation			
Consumer Protection & Commerce	☐ Hawaiian Affairs	☑ Labor & Employment	☐ Transportation			
Culture, Arts, Historic Preservation	☐ Health	Planning, Land & WaterUse Management	Other: (indicate below)			
Ecology, Energy Environmental Protection	☐ Housing	Public Safety & Corrections				
			<u> </u>			
PART IV CERTIFICATION OF LOBBYIST						
I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.						
1/12/2013			1/12/2013			
(Signature of Lobbyist)			(Date)			
PART V AUTHORIZAT	ION TO LOBBY					
NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED					
John Komeiji	Senior Vice President & General Counsel					
NAME OF ORGANIZATION (if applicable)			TELEPHONE			
Hawaiian Telcom			808-546-3878			
MAILING ADDRESS (Street)			FAX 808-546-8500			
1177 Bishop Street			EMAIL ohn.komeiji@hawaiiantel.com			
(City)	(State)		(Zip Code)			
Honolulu	н		96841			
I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.						
			1/14/2013			
(Signature of Authorizing Officer or Person Represented)			(Date)			